STATE OF CALIFORNIA

## FAULT DETECTION AND DIAGNOSTICS FOR PACKAGED DIRECT EXPANSION UNITS



CEC-NRCA-MCH-12-A (Revised 01/19)

CALIFORNIA ENERGY COMMISSION

CERTIFICATE OF ACCEPTANCE										
Fault	t Det	tection and Diagnostics (FDD) for Packaged	Direct Expans	ion Units	(Page 1 of 3)					
Project Name:			Enforcement Agency:		Permit Number:					
Project	Addres	S:	City:		Zip Code:					
System	Name	or Identification/Tag:	System Location or A	Area Served:						
Comp	plian	ce Results:		Enforcement Agency Use: Checked	by/Date					
AUTO	CAMC	TED ("Complies" or Does Not Comply")								
Inten		Submit one Certificate of Acceptance for each system that must demonstrate compliance. (NA7.5.11, §120.2(i))  This acceptance test is recommended to be performed simultaneity with NRCA-MCH-02-A (Outside Air) and NRCA-MCH-05-A (Air								
		Economizer Controls).	formed simulta	neity with <u>NRCA-MCH-02-A</u> (Outside	Air) and NRCA-MCH-05-A (Air					
		Economizer controlsy.								
A. Construction Inspection										
Building	g:	Floor:		Room/Area/Zone:	Control/System:					
1	Rec	quired Documentation (check all of the following	):							
	a.	NRCC-MCH-03-A, designs, specification sheets,		as approved by the authority having	jurisdiction.					
	b.	• • • • • • • • • • • • • • • • • • • •								
2		NRCA-MCH-02-A (Outside Air) and NRCA-MCH-05-A (Air Economizer controls); recommended to be completed simultaneity.  or to functional testing (check all of the following):								
	a.	Verify that the Fault Detection and Diagnostics (FDD) hardware is installed on the unit. (NA7.5.11.1(a))								
	b.	Verify the FDD system matches the make and i		· · · · · · · · · · · · · · · · · · ·						
3	IF t	he manufacturer HAS certified the FDD to the En		<u>-</u>						
	a.	Verify that the FDD is currently listed with the Energy Commission approved list: (NA7.5.11.1(c), (d), and (e), §120.2(i)8, JA6.3)  http://www.energy.ca.gov/title24/equipment_cert/fdd/index.html								
4		he manufacturer HAS NOT certified the FDD to t eck all the following): ( <u>Exception to §120.2(i)8</u> )	he Energy Com	mission, reference the Required Doci	umentation 1a. and 1b					
	(CIII	Verify that the following temperature sensors	are permanent	ly installed: outside air, supply air, an	d when required for differential					
	a.	economizer operation, a return air sensor. (NA			ae equ ea .e. ae. ea.					
	b.	Verify that the temperature sensor have an accuracy of ±2°F over the range of 40°F to 80°F. (NA7.5.12.1(a), §120.2(i)2)								
	c.	Verify that the controller has the capability of displaying the value of each sensor. (§120.2(i)3)								
		Verify that the controller provides a system status by indicating the following conditions: (§120.2(i)4)								
		Free cooling available;								
	d.	Economizer enabled;								
		<ul> <li>Compressor enabled;</li> <li>Heating enabled, if the system is capable of heating; and</li> </ul>								
		Mixed air low limit cycle active.								
	_	Verify that the unit controller allows manual initiation of each operating mode so that the operation of cooling systems, economizers,								
	e.	fans, and heating systems can be independently tested and verified. (§120.2(i)5)								
		Verify that the faults are reported in one of the		•	onnal					
		<ul> <li>Reported to an Energy Management Control System regularly monitored by facility personnel.</li> <li>Annunciated locally on one or more zone thermostats, or a device within five (5) feet of zone thermostat(s), clearly visible,</li> </ul>								
	f.	at eye level, and meeting the following requirements:								
		On the thermostat, device, or an adjacent written sign, display instructions to contact appropriate								
		o building personnel or an HVAC technician; and								
		o In buildings with multiple tenants, the annunciation shall either be within property management offices or in a								
		common space accessible by the property or building manager.								
	<ul> <li>Reported to a fault management application which automatically provides notification of the fault to remo provider.</li> </ul>									
Conc	Construction Inspection Compliance Results: AUTOMATED ("Complies" or Does Not Comply")									
Construction inspection compliance results. Actionistic ( Complies of Does Not Comply)										

STATE OF CALIFORNIA

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CEC-NRCA-MCH-12-A (Revised 01/19)

CALIFORNIA ENERGY COMMISSION

CLC-NRCA-WCH-12-A (Revised 01/19)	KCA-WCH-12-A (Kevised 01/19)		
CERTIFICATE OF ACCEPTANCE		NRCA-MCH-12-A	
Fault Detection and Diagnostics (FDD) for Packaged	(Page 2 of 3)		
Project Name:	Enforcement Agency:	Permit Number:	
Project Address:	City:	Zip Code:	
System Name or Identification/Tag:	System Location or Area Served:		

B. Functional Testing					
Steps:	For each HVAC unit to be tested, complete the following: (NA7.5.11.2)				
1	Air Temperature Sensor failure/fault: (NA7.5.11.2.1, §120.2(i)7A)				
a.	a. Verify the FDD system indicates normal operation. (NA7.5.11.2.1 Step 1)				
b.	Disconnect outside air temperature sensor from unit controller. Verify that the FDD system reports a fault.  (NA7.5.11.2.1 Step 2a)				
c.	Connect outside air temperature sensor to unit controller. Verify that the FDD system indicates normal operation. (NA7.5.11.2.1 Step 3b)	P/F			
2	Excess Outside Air Sensor failure/fault: Coordinate this test with NRCA-MCH-02-A (Outdoor Air) (NA7.5.11.2.2, §120.2(i)7B)				
a.	IF <u>NRCA-MCH-02-A</u> indicates "pass" THEN verify that the FDD system indicates normal operation.  (NA7.5.11.2.2 Step 1a)	P/F			
3	Economizer Operation Sensor failure/fault: Coordinate this test with NRCA-MCH-05-A (Air Economizer Controls) (NA7.5.11.2.3, §120.2(i)7C)				
a.	Simulate failure by immobilizing the outdoor air economizer damper according to the manufacturer's instructions. Verify that the FDD system reports a fault. (NA7.5.11.2.3 Step 1a)	P/F			
b.	Successfully complete and pass NRCA-MCH-05-A and verify that the FDD system report normal operation. (NA7.5.11.2.2 Step 2b)	P/F			
Functional Testing Compliance Results: AUTOMATED ("Complies" or Does Not Comply")					

STATE OF CALIFORNIA

## FAULT DETECTION AND DIAGNOSTICS FOR PACKAGED DIRECT EXPANSION UNITS



CEC-NRCA-MCH-12-A (Revised 01/19)

CALIFORNIA ENERGY COMMISSION

CEC-INCA-INCH-12-A (REVISED 01/19)								
CERTIFICATE OF ACCEPTANCE			NRCA-MCH-12-A					
Fault Detection and Diagnostics (FDD) for Packaged Direct Expansion Units (Page 3								
Project Name:	Enforcement Agency	:	Permit Number:					
Project Address:	City:		Zip Code:					
System Name or Identification/Tag:	System Location or A	or Area Served:						
DOCUMENTATION AUTHOR'S DECLARATION	STATEMENT							
I certify that this Certificate of Acceptance documentation is accurate and complete.								
Documentation Author Name:		Documentation Author Signature:						
Documentation Author Company Name:		Date Signed:						
Address:		ATT Certification Identification (If applicable):						
City/State/Zip:		Phone:						
FIELD TECHNICIAN'S DECLARATION STATEMI	ENT							
I certify the following under penalty of perjur	y, under the laws of the Stat	te of California:						
<ol> <li>The information provided on this Certif</li> </ol>								
2. I am the person who performed the acc		•	•					
3. The construction or installation identifi								
indicated in the plans and specification			oplicable acceptance					
requirements and procedures specified		• •						
4. I have confirmed that the Certificate(s)								
been completed and signed by the resp	onsible builder/installer and	d has been posted or made available	e with the building permit(s)					
issued for the building.		T						
Field Technician Name:		Field Technician Signature:						
Field Technician Company Name:		Position with Company (Title):						
Address:		ATT Certification Identification (if applicable):						
City/State/Zip:		Phone:	Date Signed:					
RESPONSIBLE PERSON'S DECLARATION STAT	EMENT							
I certify the following under penalty of perjur	• •							
1. I am the Field Technician, or the Field Te		nalf as my employee or my agent an	d I have reviewed the					
information provided on this Certificate								
2. I am eligible under Division 3 of the Busi								
design, construction or installation of fea								
Certificate of Acceptance and attest to the								
3. The information provided on this Certific								
Certificate of Acceptance complies with	• •	·	• • • • •					
enforcement agency, and conforms to the	ne applicable acceptance red	quirements and procedures specifie	d in Reference Nonresidential					
Appendix NA7.								
4. I have confirmed that the Certificate(s) of			nis Certificate of Acceptance has					
been completed and is posted or made a								
,	5. I will ensure that a completed, signed copy of this Certificate of Acceptance shall be posted, or made available with the building							
permit(s) issued for the building, and made available to the enforcement agency for all applicable inspections. I understand that a								
signed copy of this Certificate of Acceptance is required to be included with the documentation the builder provides to the building owner at occupancy.								
Responsible Acceptance Person Name:		Responsible Acceptance Person Signature:						
Responsible Acceptance Person Company Na	me:	Position with Company (Title):						
Address:		CSLB License:						

Phone:

City/State/Zip:

Date Signed: